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**PATENT APPLICATION FEE DETERMINATION RECORD**

Substitute for Form PTO-675

Application or Docket Number

09171033

**CLAIMS AS FILED - PART I**

(Column 1)

(Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a))		
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	*
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))		

\* If the difference in column 1 is less than zero, enter "0" in column 2.

**SMALL ENTITY**

OR

**OTHER THAN  
SMALL ENTITY**

RATE	FEE
	\$ _____
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL	

OR

OR

OR

OR

OR

RATE	FEE
	\$ _____
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL	

**CLAIMS AS AMENDED - PART II**

(Column 1)

(Column 2)

(Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(d))	16	Minus 20	4
Independent (37 CFR 1.16(b))	2	Minus 3	3
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

**SMALL ENTITY**

OR

**OTHER THAN  
SMALL ENTITY**

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

OR

OR

OR

OR

OR

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	990

4.27-06

(Column 1)

(Column 2)

(Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(d))	19	Minus 20	1
Independent (37 CFR 1.16(b))	3	Minus 3	3
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

**SMALL ENTITY**

OR

**OTHER THAN  
SMALL ENTITY**

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

OR

OR

OR

OR

OR

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

(Column 1)

(Column 2)

(Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(d))	*	Minus	*
Independent (37 CFR 1.16(b))	*	Minus	*
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

**SMALL ENTITY**

OR

**OTHER THAN  
SMALL ENTITY**

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

OR

OR

OR

OR

OR

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-6196 and select option 2.

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective October 1, 2000

Application or Docket Number

09761033

**CLAIMS AS FILED - PART I**

	Column 1 NUMBER FILED	Column 2 NUMBER EXTRA
TOTAL CLAIMS	27	
FOR		
TOTAL CHARGEABLE CLAIMS	27 minus 20 = 7	7
DEPENDENT CLAIMS	3 minus 3 = 0	0
MULTIPLE DEPENDENT CLAIM PRESENT	<input type="checkbox"/>	

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

01/31/04

	Column 1 CLAIMS REMAINING AFTER AMENDMENT	Column 2 NUMBER CLAIMS PREVIOUSLY PAID FOR	Column 3 PRESENT EXTRA
Total	14	27	
Independent	3	3	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	<input type="checkbox"/>		

7/22/05

	Column 1 CLAIMS REMAINING AFTER AMENDMENT	Column 2 NUMBER CLAIMS PREVIOUSLY PAID FOR	Column 3 PRESENT EXTRA
Total	14	27	
Independent	2	3	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	<input type="checkbox"/>		

12/13/05

	Column 1 CLAIMS REMAINING AFTER AMENDMENT	Column 2 NUMBER CLAIMS PREVIOUSLY PAID FOR	Column 3 PRESENT EXTRA
Total	16	27	
Independent	2	3	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	<input type="checkbox"/>		

\* If the entry in column 1 is less than the entry in column 2, enter "0" in column 3.  
 \* If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter "20".  
 \* If the "Highest Number Previously Paid For" in THIS SPACE is less than 3, enter "3".  
 \* The "Highest Number Previously Paid For" (Total or Independent) is the highest number entered in the appropriate box in column 1.

SMALL ENTITY TYPE <input type="checkbox"/>		OR	OTHER THAN SMALL ENTITY	
RATE	FEE		RATE	FEE
BASE FEE	300.00	OR	BASE FEE	710.00
X50-		OR	X510-	26
X40-		OR	X30-	
+125-		OR	+270-	
TOTAL		OR	TOTAL	26

SMALL ENTITY TYPE <input type="checkbox"/>		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X50-		OR	X510-	
X40-		OR	X30-	
+125-		OR	+270-	
TOTAL ADJST. FEE		OR	TOTAL ADJST. FEE	

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X50-		OR	X510-	
X40-		OR	X30-	
+125-		OR	+270-	
TOTAL ADJST. FEE		OR	TOTAL ADJST. FEE	

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X50-		OR	X510-	
X40-		OR	X30-	
+125-		OR	+270-	
TOTAL ADJST. FEE		OR	TOTAL ADJST. FEE	

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### Application of Control Methods

09761033

**Section 1**

**Figure 1**

TOTAL CLAIMS	27	
FOR	NUMBER FILED	NUMBER DATA
TOTAL COUSABLE CLAIMS	27 minus 20 =	7
DEPENDENT CLAIMS	3 minus 3 =	0
SAMPLE DEPENDENT CLAIM PRESENT		

\* If the difference in column 1 is less than zero, enter "V" in column 2

## Chapter 11

**CONCLUSIONS**

**Figure 2**

DATE RECEIVED AFTER REVIEW	DATE RECEIVED FEDERALLY REVIEWED	REVIEW DATE
80	80	80
80	80	80

FIRST PRESENTATION OF MULTIPLE OPEN-ENDED CLAIM

**WALL-TO-WALL**

**TUN** **0**

## ON SMALL BUSINESS

DATE	FEE	DATE	FEE
10/10/78	25.00	10/10/78	75.00
11/10/78		11/10/78	25.00
12/10/78		12/10/78	
1/10/79		1/10/79	
TOTAL		TOTAL	100.00

## Small Insects

OR SMALL BUSINESS

DATE	AMOUNT	DATE	AMOUNT
10/10/01	100.00	10/10/01	100.00
10/11/01	100.00	10/11/01	100.00
10/12/01	100.00	10/12/01	100.00
10/13/01	100.00	10/13/01	100.00
10/14/01	100.00	10/14/01	100.00
10/15/01	100.00	10/15/01	100.00
10/16/01	100.00	10/16/01	100.00
10/17/01	100.00	10/17/01	100.00
10/18/01	100.00	10/18/01	100.00
10/19/01	100.00	10/19/01	100.00
10/20/01	100.00	10/20/01	100.00
10/21/01	100.00	10/21/01	100.00
10/22/01	100.00	10/22/01	100.00
10/23/01	100.00	10/23/01	100.00
10/24/01	100.00	10/24/01	100.00
10/25/01	100.00	10/25/01	100.00
10/26/01	100.00	10/26/01	100.00
10/27/01	100.00	10/27/01	100.00
10/28/01	100.00	10/28/01	100.00
10/29/01	100.00	10/29/01	100.00
10/30/01	100.00	10/30/01	100.00
10/31/01	100.00	10/31/01	100.00

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
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RATE	MONTHLY	OR	RATE	MONTHLY
	FEE			FEE
10%		OR	10%	
20%		OR	20%	
40%		OR	40%	
TOTAL		OR	TOTAL	
AMOUNT			AMOUNT	

1999

100

PAGE	YEAR-TOTAL FEE		PAGE	YEAR-TOTAL FEE
1230-		OR	1230-	
240-		OR	1230-	
400-		OR	470-	
TOTAL ANNUAL FEE		OR	TOTAL ANNUAL FEE	

\* For entry 1, select the box in column 2, with "1" in column 3.  
 \* For "Repeat Number Frequently Paid For" in THIS SPACE is less than 25, enter "25".  
 \* For "Repeat Number Frequently Paid For" in THIS SPACE is less than 2, enter "2".  
 The "Repeat Number Frequently Paid For" (line 6) is the number of times the taxpayer has been in column 1.

FORM 1041-10-65 (Rev. 10-65) Bureau of Customs, U.S. DEPARTMENT OF COMMERCE

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